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Bib Data Sheet

CONFIRMATION NO. 4057

SERIAL NUMBER 08/260,536	FILING DATE 06/16/1994 RULE	CLASS 435	GROUP ART UNIT 1648	ATTORNEY DOCKET NO. 57704
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APPLICANTS

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**** CONTINUING DATA *******

This application is a CIP of 08/055,519 04/30/1993 ABN

**** FOREIGN APPLICATIONS *******

**** SMALL ENTITY ****

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <u> </u> Allowance <u> </u>	STATE OR COUNTRY IL	SHEETS DRAWING 14	TOTAL CLAIMS <u>86</u>	INDEPENDENT CLAIMS <u>51</u>
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Examiner's Signature Initials

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TITLE

METHODS OF TREATING AND DETECTING CANCER USING VIRUSES

FILING FEE RECEIVED 5115	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;"><input type="checkbox"/> All Fees</div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;"><input type="checkbox"/> 1.16 Fees (Filing)</div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;"><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</div> <div style="border: 1px solid black; padding: 2px; margin-bottom: 2px;"><input type="checkbox"/> 1.18 Fees (Issue)</div> <div style="border: 1px solid black; padding: 2px;"><input type="checkbox"/> Other _____</div>
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